

Fig. 1

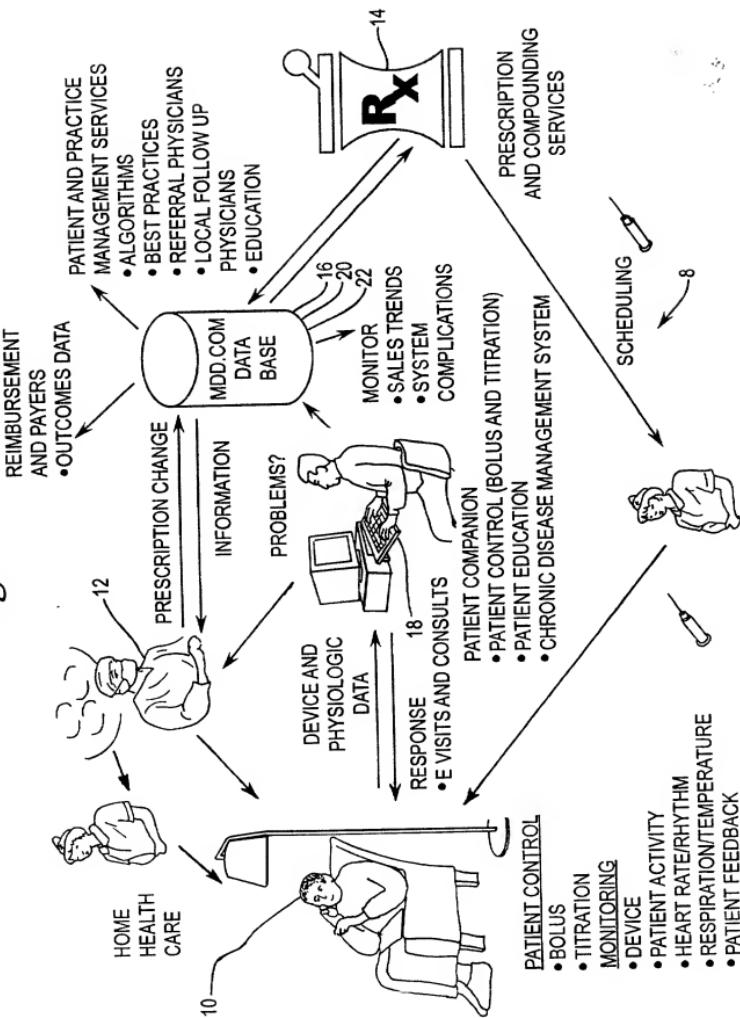
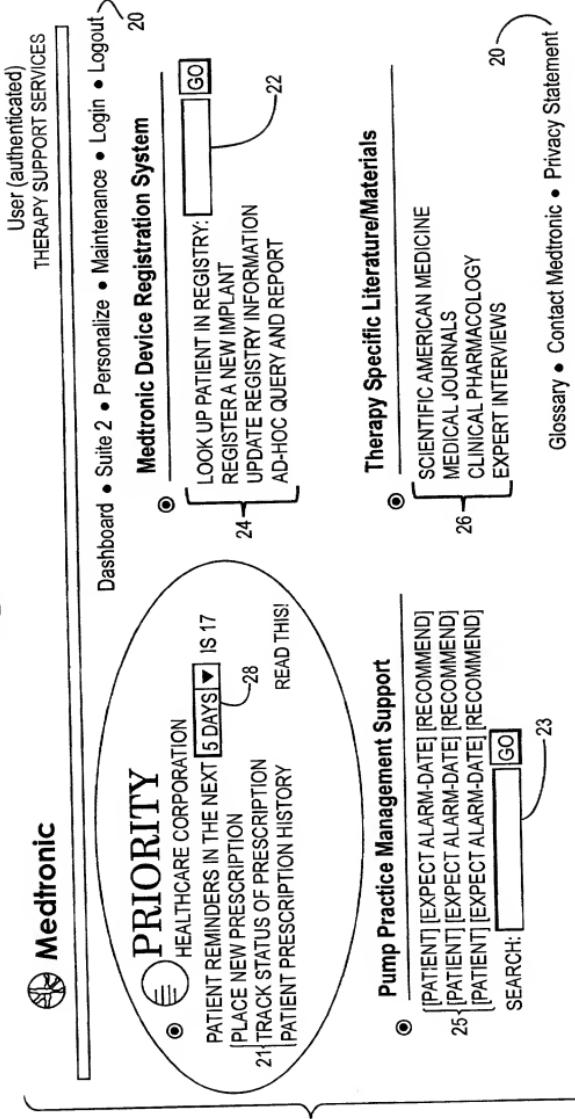


Fig. 2



*Fig. 3*

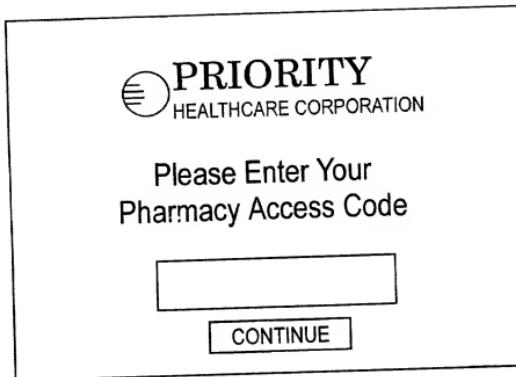


Fig. 4

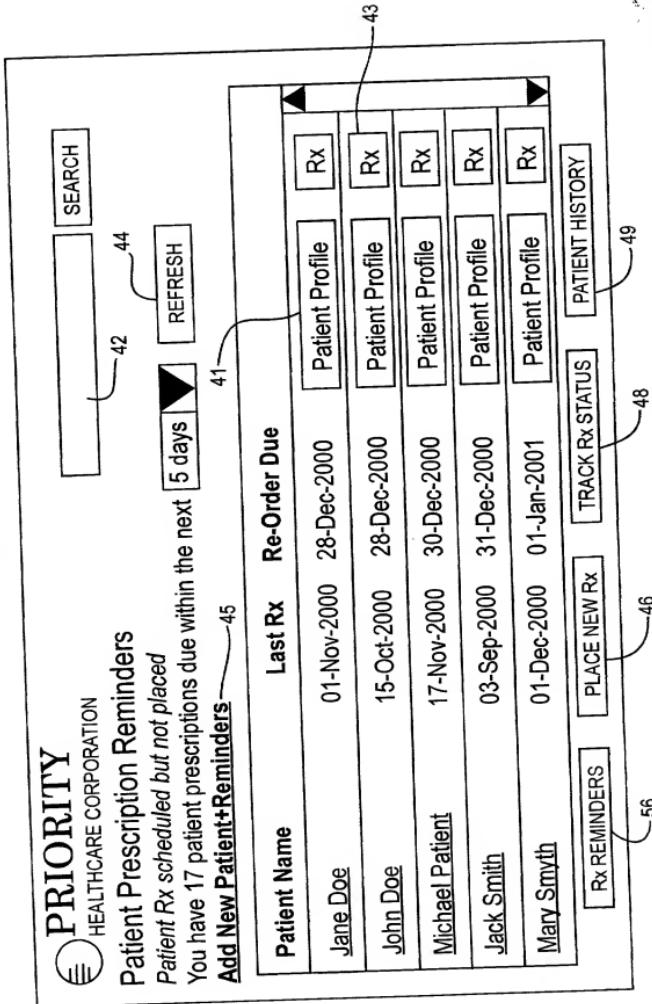


Fig. 5

**PRIORITY**  
HEALTHCARE CORPORATION

**Add Patient Prescription Reminder**

Select Patient:   (Last-name, First-name)

Patient Name	Last Rx	Next Rx	View/Edit
John Doe	28-Dec-2000	<input type="button" value="Calendar"/>	<input type="button" value="Patient Profile"/>

41

54

48

46

56

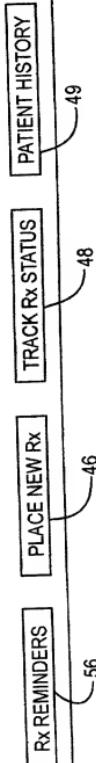
Fig. 6



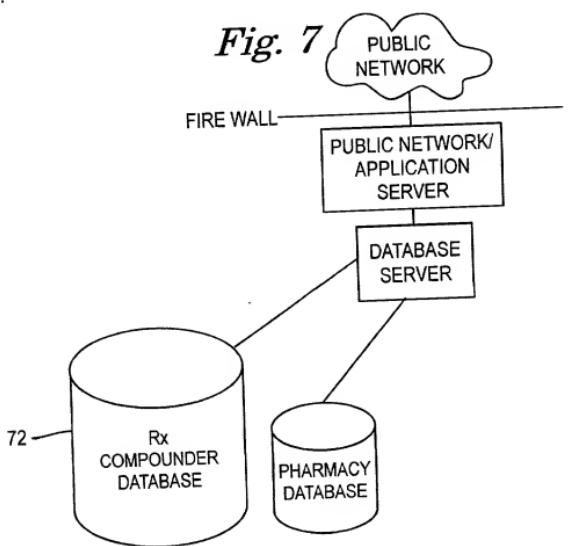
## Confirm Patient Prescription Reminder

Reminder has been scheduled. Click Submit to continue or Cancel to change.

Patient Name	Last Rx	Next Rx	Change
John Doe	28-Dec-2000	30-Jan-2001	<a href="#">Calendar</a>



*Fig. 7*



*Fig. 8*

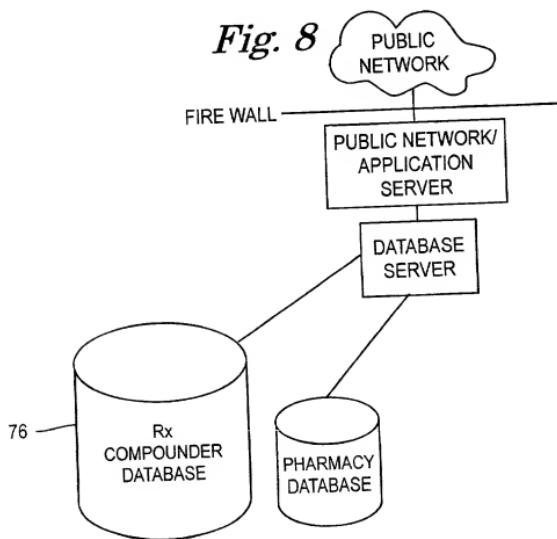


Fig. 9

**PRIORITY**  
HEALTHCARE CORPORATION

Order New Prescription

<input type="text"/> Select Patient:	<input type="text"/> SEARCH	(Last-name, First-name)
<input type="text"/> Add New Patient+Prescription	94	96

Patient Name	ID	Actions	
Jane Doe	0823	<input type="text"/> Rx History	<input type="text"/> Patient Profile
John Doe	0488	<input type="text"/> Rx History	<input type="text"/> Patient Profile
Michael Patient	0787	<input type="text"/> Rx History	<input type="text"/> Patient Profile
Jack Smith	0123	<input type="text"/> Rx History	<input type="text"/> Patient Profile
Mary Smyth	0333	<input type="text"/> Rx History	<input type="text"/> Patient Profile

<input type="text"/> PLACE NEW Rx	<input type="text"/> TRACK RX STATUS	<input type="text"/> PATIENT HISTORY
<input type="text"/> RX REMINDERS	46	48

41

43

46

48

56

Fig. 10

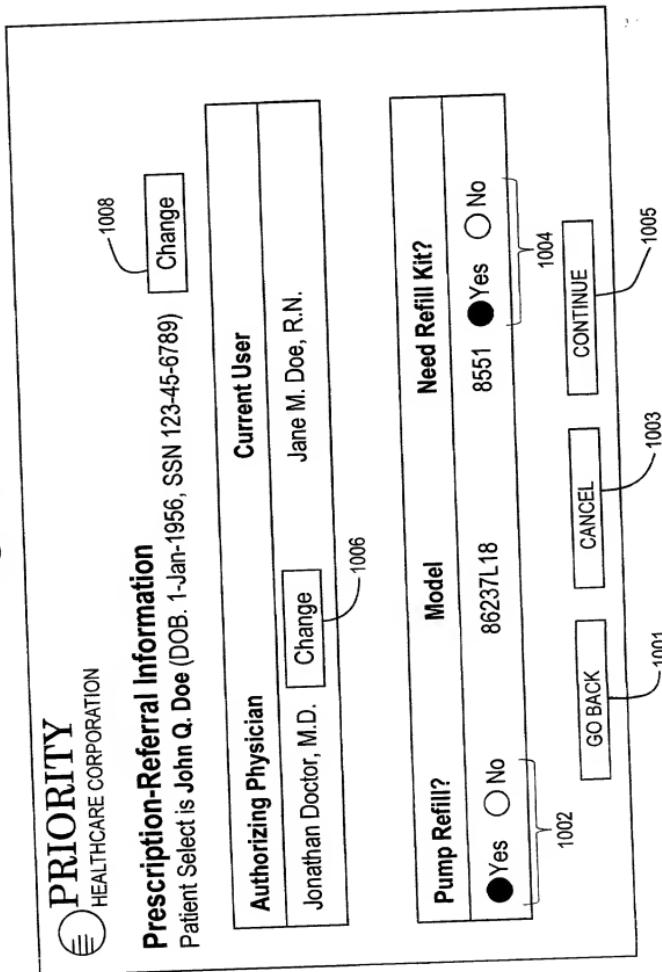


Fig. 11

PRIORITY		
HEALTHCARE CORPORATION		
Prescription-Referral Information		
Patient Select is John Q. Doe (DOB: 1-Jan-1956, SSN 123-45-6789)		
<input type="button" value="Change"/>		
Primary Diagnosis	ICD9 Code	Actions
Neuropathic back pain, L2 area injury	XYZ	<input type="button" value="Update"/>
Allergies		<input type="button" value="Update"/>
Sensitive to Thimerisol based preservatives		
Height	Weight	Notes
170 cm.	137 lbs.	None
<input type="button" value="GO BACK"/>		<input type="button" value="CANCEL"/>
		<input type="button" value="CONTINUE"/>

1003

1102

1005

1001

Fig. 12

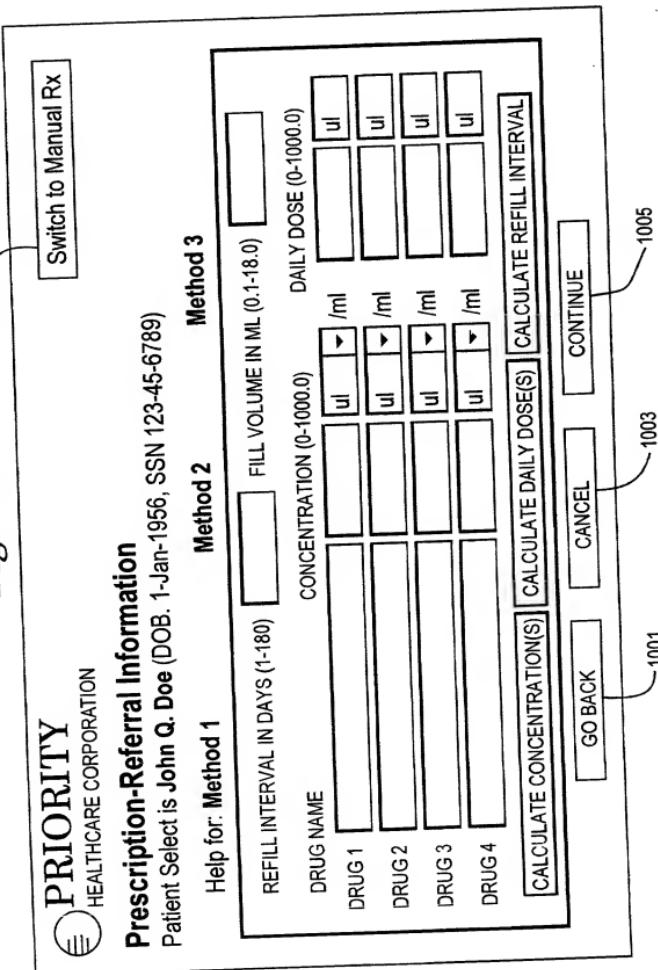


Fig. 13

PRIORITY HEALTHCARE CORPORATION		
<b>Prescription-Referral Information</b> Patient Select is John Q. Doe (DOB: 1-Jan-1956, SSN 123-45-6789)		
Medication	Concentration (mg or mcg/ml)	Daily Dose (mg or mcg/day)
1. Infumorph	25 mg/ml	1.5 ml/day
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
Syringe volume (typically 10 or 20 ml): <input type="text" value="20 ml"/>		
Fixed delivery rate or current programmed rate: <input type="text" value="20 ml/day"/>		
<input type="button" value="GO BACK"/> <input type="button" value="CANCEL"/> <input type="button" value="CONTINUE"/>		
1302 → <input type="text" value="1306"/> → <input type="text" value="1003"/> → <input type="text" value="1005"/> → <input type="text" value="1304"/>		
<input type="button" value="Switch to Manual Rx"/>		

Fig. 14

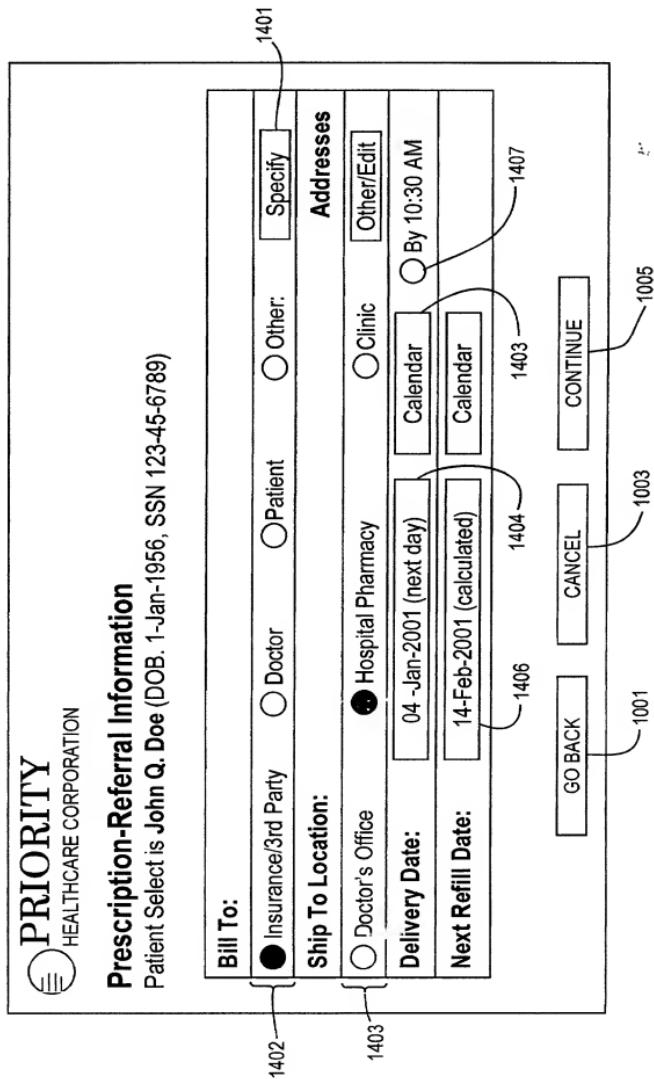


Fig. 15



## Prescription-Referral Information

Patient Select is John Q. Doe (DOB: 1-Jan-1956, SSN 123-45-6789)

Section	Action
Physician (proxy) Information	OK <input checked="" type="checkbox"/>
Patient Information	OK <input checked="" type="checkbox"/>
Insurance (billing) Information	Review <input checked="" type="checkbox"/>
Medical (Rx) Information	Review <input checked="" type="checkbox"/>
Pump Information	Review <input checked="" type="checkbox"/>
Shipping Information	Review <input checked="" type="checkbox"/>

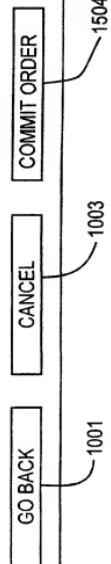


Fig. 16

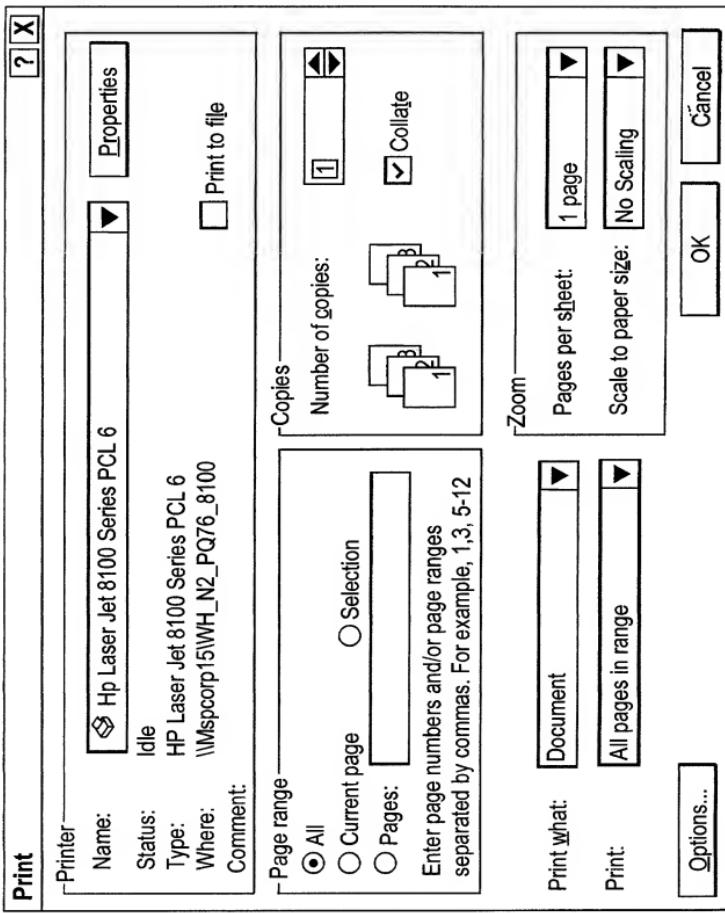


Fig. 17

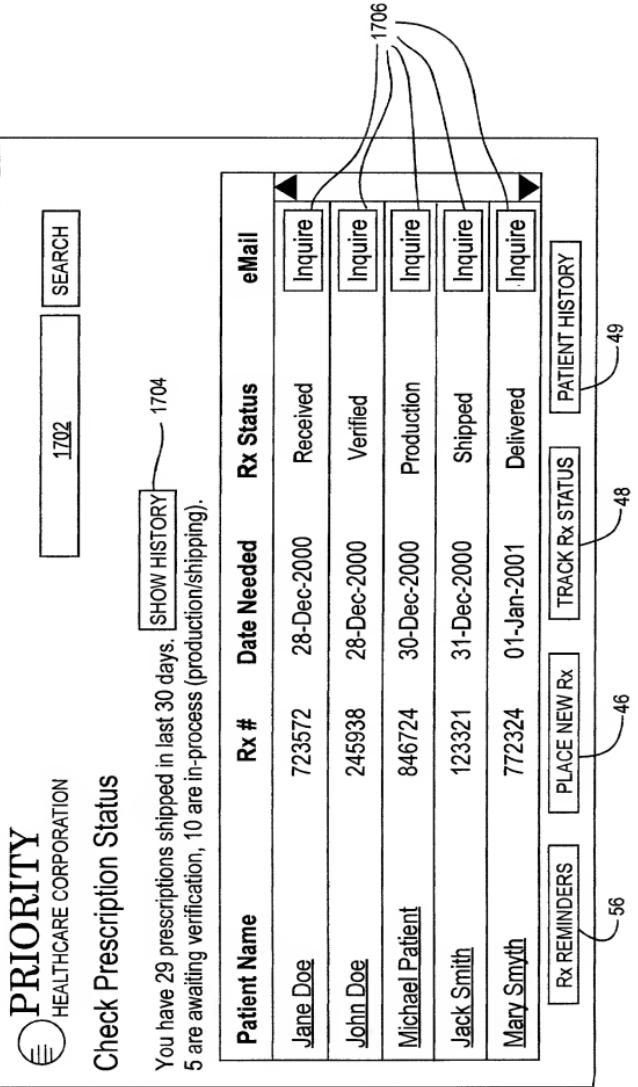


Fig. 18

**PRIORITY**  
HEALTHCARE CORPORATION

Patient History, Charts, Reports

Select Patient:   (Last-name, First-name)

Patient Name	ID	Pharmacy	Medtronic
Jane Doe	0823	History <input type="button" value="Chart"/>	<input type="button" value="Print Report"/> <input type="button" value="Pump Info."/>
John Doe	0488	History <input type="button" value="Chart"/>	<input type="button" value="Print Report"/> <input type="button" value="Pump Info."/>
Michael Patient	0787	History <input type="button" value="Chart"/>	<input type="button" value="Print Report"/> <input type="button" value="Pump Info."/>
Jack Smith	0123	History <input type="button" value="Chart"/>	<input type="button" value="Print Report"/> <input type="button" value="Pump Info."/>
Mary Smyth	0333	History <input type="button" value="Chart"/>	<input type="button" value="Print Report"/> <input type="button" value="Pump Info."/>
		<input type="button" value="PLACE NEW RX"/>	<input type="button" value="PATIENT HISTORY"/>
		<input type="button" value="RX REMINDERS"/>	<input type="button" value="TRACK RX STATUS"/>

1808

1806 46 48 49 1804

1806 46 48 49 1804

Fig. 19

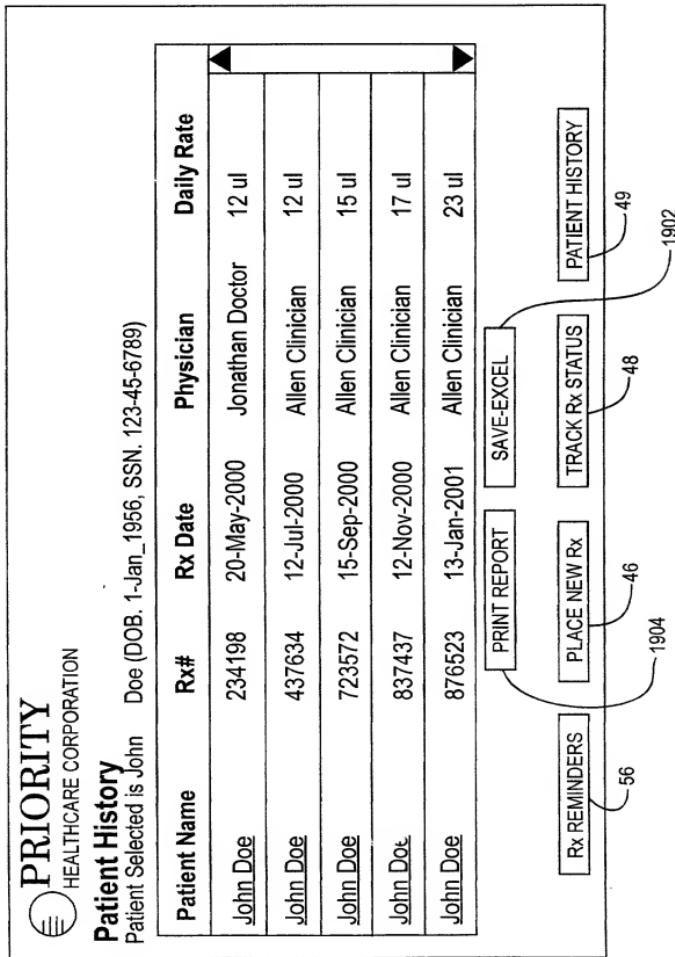
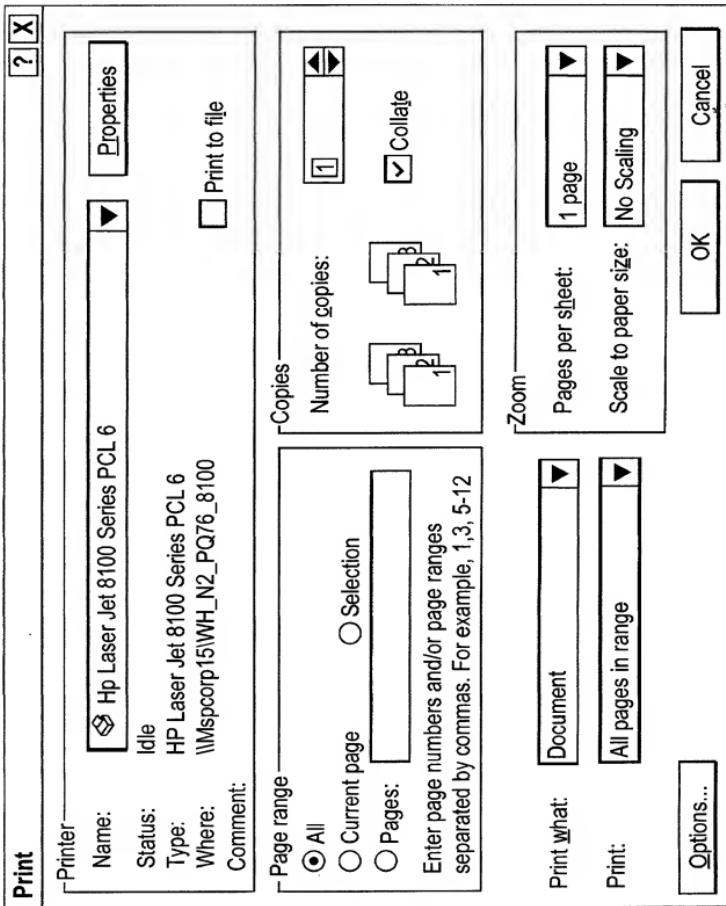


Fig. 20



*Fig. 21*

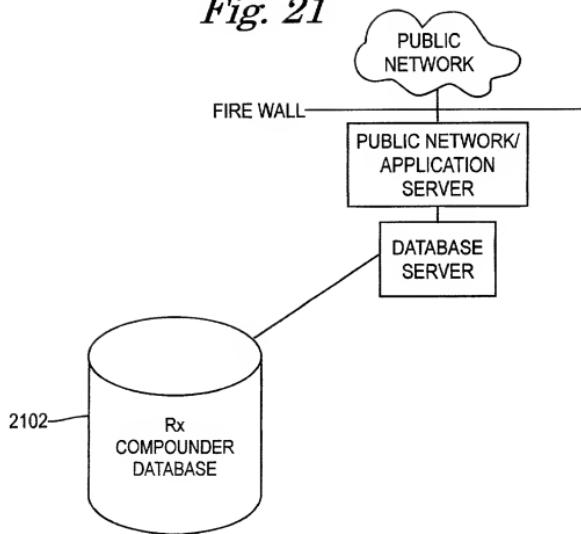


Fig. 22

 <b>PRIORITY</b> HEALTHCARE CORPORATION	
<b>Patient Registration (Part 1 of 4)</b> <i>Create new patient profile</i>	
Patient Name: <input type="text"/> <b>ID: New</b> Street Address: <input type="text"/> (***) back-filled from DRS when available City: <input type="text"/> (***) Street Address: <input type="text"/> (***) State: <input type="text"/> (***) Zip Code: <input type="text"/> (***) Daytime Phone: <input type="text"/> AAA-PPP-NNNN Evening Phone: <input type="text"/> AAA-PPP-NNNN * Date of Birth: <input type="text"/> DD-MMM-YYYY * Social Security No: <input type="text"/> NNN-NN-NNNN	
<input type="button" value="GO BACK"/> <input type="button" value="CANCEL"/> <input type="button" value="CONTINUE"/> <span style="float: right;">1001</span> <span style="float: right;">1003</span> <span style="float: right;">1005</span>	

*Fig. 23*

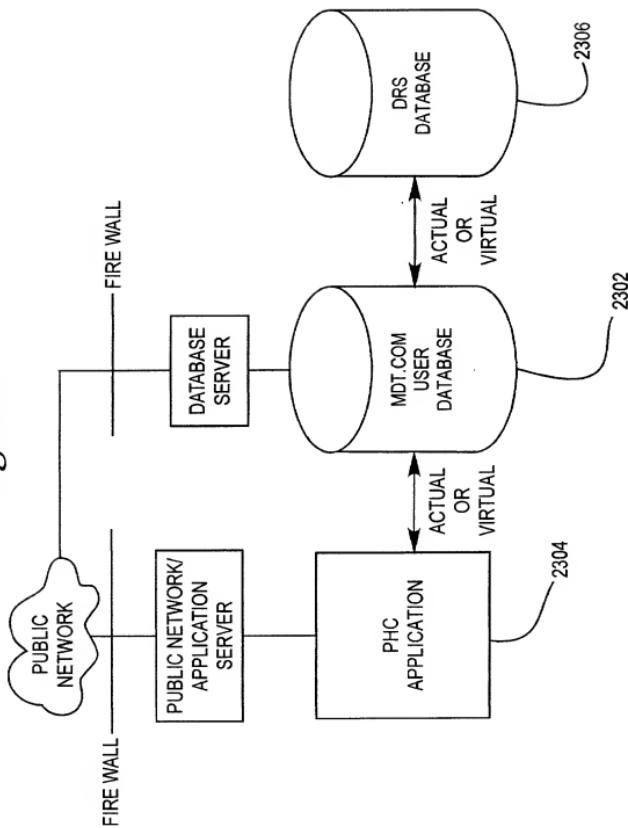


Fig. 24

<b>PRIORITY</b> HEALTHCARE CORPORATION	
<b>Patient Registration (Part 2 of 4)</b>	
<i>Patient emergency contact and medical information</i>	
Patient Name:	New A. Patient
Emergency Contact:	<input type="text"/> ID: 523
Relationship:	<input type="text"/> Phone: <input type="text"/>
Allergies:	<input type="text"/>
Height:	<input type="text"/> cm
Weight:	<input type="text"/>
Primary Diagnosis:	<input type="text"/> (pre-filled from DRS when available)
ICD9 Code:	<input type="text"/> Notes: <input type="text"/>
<input type="button"/> GO BACK <input type="button"/> CANCEL <input type="button"/> CONTINUE <input type="text"/> 1003 <input type="text"/> 1005	

Fig. 25

<b>PRIORITY</b> HEALTHCARE CORPORATION	
<b>Patient Registration (Part 3 of 4)</b>	
<b>Patient Insurance Information.</b>	
<input checked="" type="radio"/> Primary <input type="radio"/> Secondary <input type="radio"/> Tertiary	
Patient Name: New A. Patient      ID: 523	
Insured Name: _____	
Relationship: _____	
Insured SSN: _____	
Insurance Company: _____	
Insurance Phone: _____	
Group Number: _____ Notes: _____	
<input type="button" value="GO BACK"/> <input type="button" value="CANCEL"/> <input type="button" value="CONTINUE"/>	
1001	
1003	
1005	

Fig. 26

**PRIORITY**  
HEALTHCARE CORPORATION

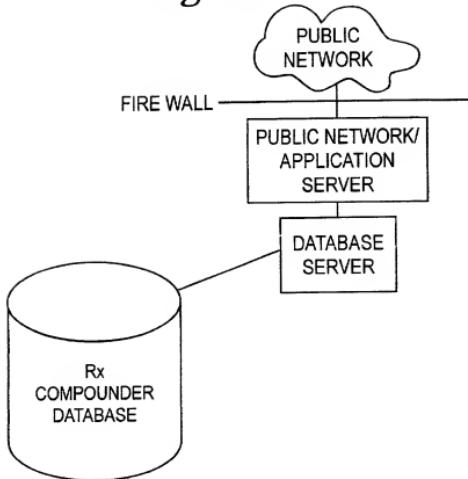
**Patient Registration (Part 4 of 4)**  
**Patient Medical devices - Drug Pump**

Patient Name:	New A. Patient			<b>ID:</b> 523
Infusion Pump:	<input type="radio"/> Yes	<input type="radio"/> No	Manufacturer:	(***)
Brand:			Model No.:	(***)
Implant Date:	(***)	Reservoir Volume:	(parsed)	ml
Notes:				

**GO BACK** **CANCEL** **CONTINUE**

1001 → 1003 → 1005

*Fig. 27*



*Fig. 28*

The screenshot shows a user interface for "PRIORITY HEALTHCARE CORPORATION". The logo, which consists of a circle with three horizontal lines, is positioned to the left of the company name. Below the company name is the text "Please select Patient:". Underneath this text are two radio button options: " Jack Smith (SSN 123-45-6789)" and " Mary Smith (SSN 987-65-4321)".

Fig. 29

<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>																													
<a href="#">NETSCAPE</a> <a href="#">FILE</a> <a href="#">EDIT</a> <a href="#">VIEW</a> <a href="#">GO</a> <a href="#">COMMUNICATION</a> <a href="#">HELP</a>																													
<h3>Multiple Drug Calculation System</h3>																													
<p>THE INFORMATION CAN BE CALCULATED USING THREE METHODS</p>																													
<p><b>METHOD 1:</b> ENTER THE DESIRED REFILL INTERVAL, FILL VOLUME, DRUG CONCENTRATION UNITS AND DAILY DOSE(S). THEN SELECT [CALCULATE CONCENTRATION].</p>																													
<p><b>METHOD 2:</b> ENTER THE DESIRED REFILL INTERVAL, FILL VOLUME, DRUG CONCENTRATION UNITS AND CONCENTRATION(S). THEN SELECT [CALCULATE DAILY DOSE].</p>																													
<p><b>METHOD 3:</b> ENTER THE DESIRED FILL VOLUME. THEN FOR THE DRUG 1 SELECT THE DRUG CONCENTRATION UNITS, CONCENTRATION AND DAILY DOSE. NEXT, SELECT [CALCULATE REFILL INTERVAL].</p>																													
<table border="1"> <tr> <td>REFILL INTERVAL IN DAYS (1-180)</td> <td><input type="text"/></td> <td>FILL VOLUME IN ML (0.1-18.0)</td> <td><input type="text"/></td> </tr> <tr> <td>DRUG NAME</td> <td colspan="3">CONCENTRATION (0-000.0)</td> </tr> <tr> <td>DRUG 1</td> <td><input type="text"/></td> <td><input type="text"/> /ml</td> <td><input type="text"/> DAILY DOSE (0-1000.0)</td> </tr> <tr> <td>DRUG 2</td> <td><input type="text"/></td> <td><input type="text"/> /ml</td> <td><input type="text"/></td> </tr> <tr> <td>DRUG 3</td> <td><input type="text"/></td> <td><input type="text"/> /ml</td> <td><input type="text"/></td> </tr> <tr> <td>DRUG 4</td> <td><input type="text"/></td> <td><input type="text"/> /ml</td> <td><input type="text"/></td> </tr> <tr> <td colspan="2"> <input type="button" value="CALCULATE CONCENTRATION(S)"/> </td> <td> <input type="button" value="CALCULATE DAILY DOSE(S)"/> </td> <td> <input type="button" value="CALCULATE REFILL INTERVAL"/> </td> </tr> </table>		REFILL INTERVAL IN DAYS (1-180)	<input type="text"/>	FILL VOLUME IN ML (0.1-18.0)	<input type="text"/>	DRUG NAME	CONCENTRATION (0-000.0)			DRUG 1	<input type="text"/>	<input type="text"/> /ml	<input type="text"/> DAILY DOSE (0-1000.0)	DRUG 2	<input type="text"/>	<input type="text"/> /ml	<input type="text"/>	DRUG 3	<input type="text"/>	<input type="text"/> /ml	<input type="text"/>	DRUG 4	<input type="text"/>	<input type="text"/> /ml	<input type="text"/>	<input type="button" value="CALCULATE CONCENTRATION(S)"/>		<input type="button" value="CALCULATE DAILY DOSE(S)"/>	<input type="button" value="CALCULATE REFILL INTERVAL"/>
REFILL INTERVAL IN DAYS (1-180)	<input type="text"/>	FILL VOLUME IN ML (0.1-18.0)	<input type="text"/>																										
DRUG NAME	CONCENTRATION (0-000.0)																												
DRUG 1	<input type="text"/>	<input type="text"/> /ml	<input type="text"/> DAILY DOSE (0-1000.0)																										
DRUG 2	<input type="text"/>	<input type="text"/> /ml	<input type="text"/>																										
DRUG 3	<input type="text"/>	<input type="text"/> /ml	<input type="text"/>																										
DRUG 4	<input type="text"/>	<input type="text"/> /ml	<input type="text"/>																										
<input type="button" value="CALCULATE CONCENTRATION(S)"/>		<input type="button" value="CALCULATE DAILY DOSE(S)"/>	<input type="button" value="CALCULATE REFILL INTERVAL"/>																										

Fig. 30

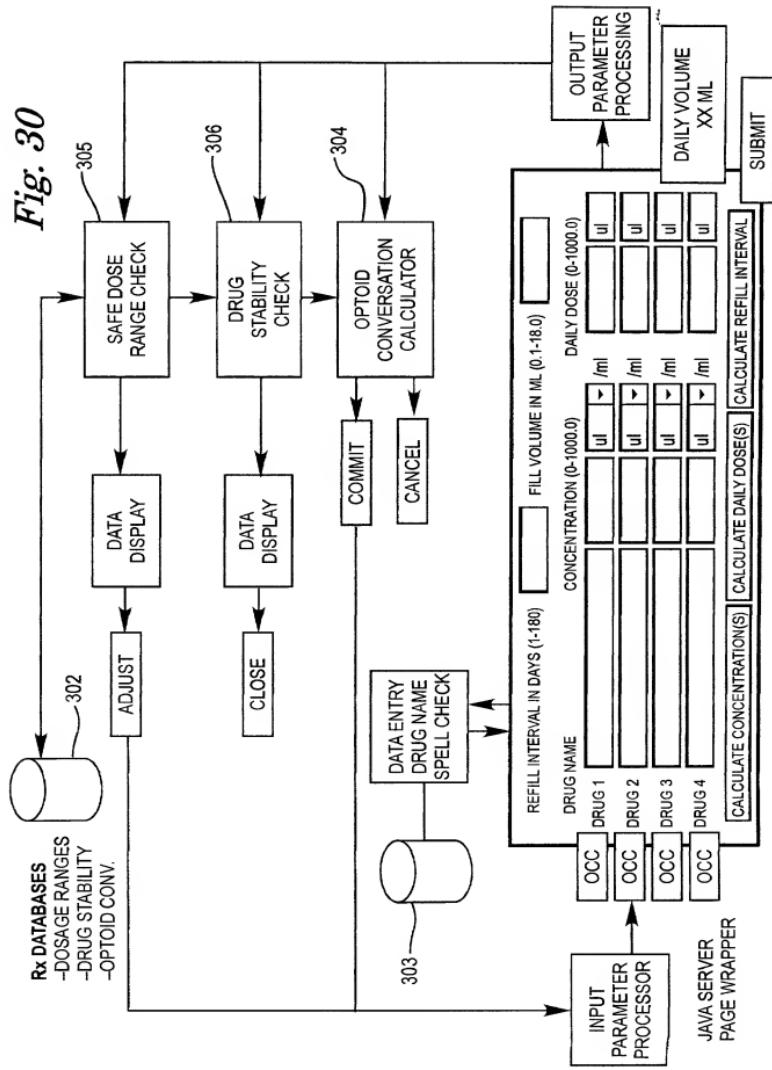


Fig. 31

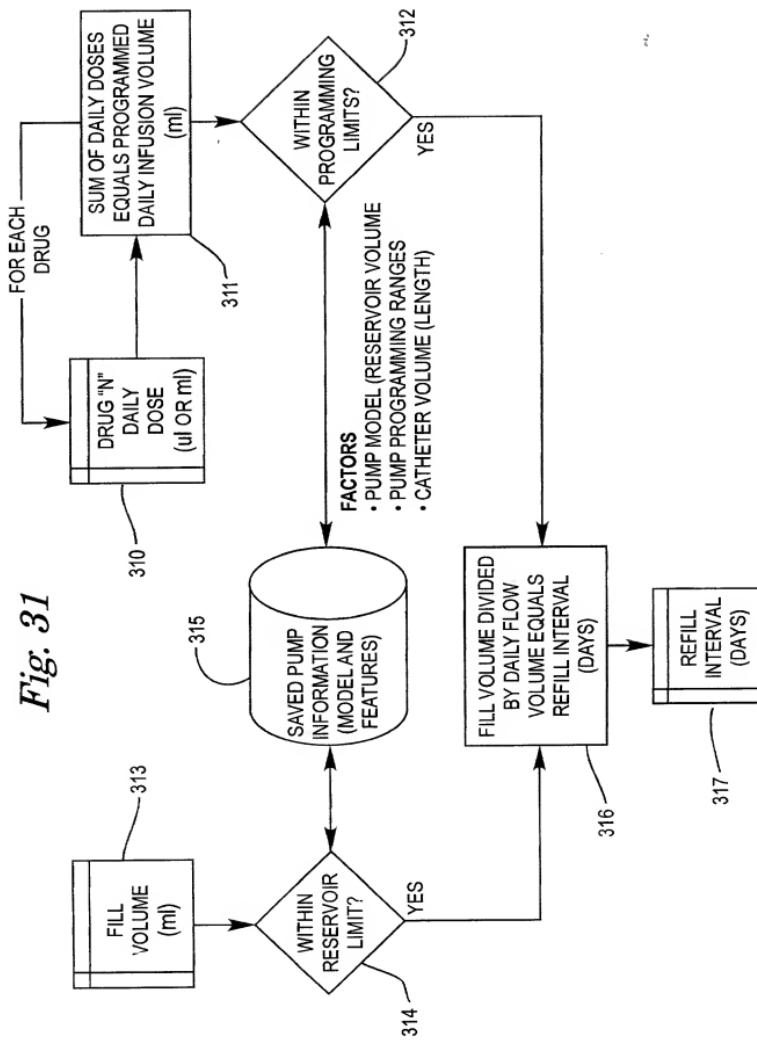


Fig. 32

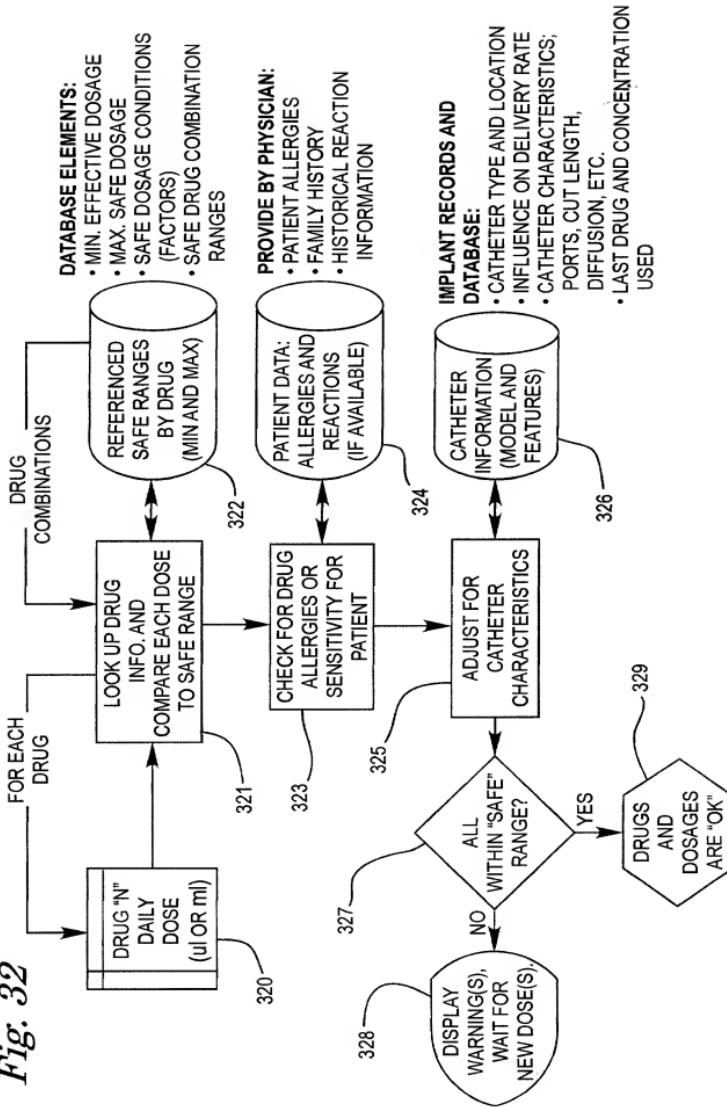


Fig. 33

